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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/773,238	
	Filing Date	February 9, 2004	
	First Named Inventor	Masaji NOGUCHI	
	Art Unit	2633	
	Examiner Name	TBD	
Total Number of Pages in This Submission	59	Attorney Docket Number	19546.0048

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>  <b>PTO Form 1449 and 2 non-English references with concise explanation and 1 US patent reference equivalent</b>		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>				
Firm or Individual name	Michael A. Schwartz, Reg. No. 40,161 Swidler Berlin Shereff Friedman LLP			
Signature				
Date	June 15, 2004			

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name			
Signature		Date	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Masaji NOGUCHI, et al.

Application No. 10/773,238

Filed: February 9, 2004

Art Unit: 2633

Examiner: TBD

For: WAVELENGTH SELECTION MODULE COMPRISING VARIABLE WAVELENGTH  
SELECTING SECTION FOR SELECTING A PLURALITY OF WAVELENGTHS

INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

For insuring compliance with the applicant's duty of disclosure under 37 CFR § 1.56, the undersigned hereby submits the documents listed on the attached Form PTO-1449 for consideration by the Examiner in charge of the above-identified patent application.

☒ U.S. patent applications which the applicant considers to be related to the above-identified application are as follows:

English Equivalent U.S. Patent No. 6,097,659 corresponding to JP 2000-149555

☒ A concise explanation of the relevance of the non-English language references is found in the English language abstracts attached to document nos. JP2000-149555 and JP2000-241782

☐ The relevance of the references is indicated on the enclosed copy of the Search Report for the priority application.

These documents are being submitted (check only one of the next four boxes):

- ☐ within three months of the filing of the above U.S. national application or of the date of entry of the U.S. national stage in an International Patent Application (no fee is due);
- ☒ before receiving a first Office Action on the merits of the above-identified patent application; or before receiving a first Office Action after filing of a Request for Continued Examination (no fee is due);
- ☐ following receipt of a first Office Action, but before issuance of a Final Office Action or a Notice of Allowance (if this box is checked, one of the last three boxes also must be checked);

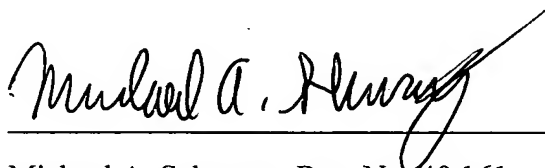
OR

- ☐ following receipt of a Notice of Allowance or a Final Office Action (if this box is checked, the next box and one of the last two boxes also must be checked).
- ☐ The Commissioner is hereby authorized to charge Deposit Account 19-5127, in the amount of \$180.00 for payment of the fee set forth in 37 CFR § 1.17(p).
- ☐ The undersigned certifies that each item of this information is being submitted within three months of the date it was cited by a foreign patent office in a counterpart application.
- ☐ The undersigned certifies that, after making reasonable inquiry, he/she has no knowledge that any item of this information was cited by a foreign patent office in a counterpart application or was known more than three months prior to this submission.

The Commissioner is hereby authorized to charge payment of any deficiency in the above fee(s) or to charge any additional fees required under 37 CFR § 1.16 or 1.17 or credit any overpayment to Deposit Account No. 19-5127.

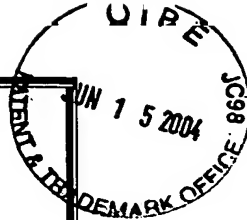
Respectfully submitted,

Date: June 15, 2004



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<b>FORM PTO-1449</b>  <b><u>INFORMATION DISCLOSURE CITATION</u></b>	Attorney Docket: 19546.0048 Applicants: Masaji NOGUCHI Filing Date: February 9, 2004	Application No.: 10/773,238 Examiner: TBD Group Art Unit: TBD
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U.S. PATENT DOCUMENTS						
EXAMINER INITIAL	REF. NO.	DOCUMENT NUMBER	DATE	NAME	CLASS	SUB-CLASS
	AA	6,097,659	August 1, 2000	Kang		
	AB					
	AC					
	AD					
	AE					
	AF					

FOREIGN PATENT DOCUMENTS							
	REF. NO.	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUB-CLASS	TRANSLATION
	CA	2000-149555	30.05.2000	JP			
	CB	2000-241782	08.09.2000	JP			
	CC						
	CD						
	CE						
	CF						
	CG						
	CH						
	CI						
	CJ						

OTHER REFERENCES		
	REF. NO.	AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.
	CK	
	CL	
	CM	
	CN	
	CO	
	CP	
	CQ	
	CR	
	CS	
	CT	
	CU	
	CV	
	CW	
	CX	
	CY	
	CZ	

Examiner	Date Considered
Examiner: Initial if reference consider, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Application	